

<b>SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS</b> Offeror To Complete Block 12, 17, 23, 24, & 30				<b>1. Requisition Number</b> SEE SCHEDULE		<b>Page</b> 1 <b>Of</b> 5	
<b>2. Contract No.</b> W56HZV-04-D-B011		<b>3. Award/Effective Date</b> 2004JUN16		<b>4. Order Number</b> 0001		<b>5. Solicitation Number</b>	
<b>7. For Solicitation Information Call:</b>		<b>A. Name</b> PATRICIA ANN BIERI		<b>B. Telephone Number (No Collect Calls)</b> (586)574-8286		<b>6. Solicitation Issue Date</b>	
<b>9. Issued By</b> TACOM WARREN BLDG 231 AMSTA-AQ-ADBB WARREN, MICHIGAN 48397-5000  HTTP://CONTRACTING.TACOM.ARMY.MIL  e-mail: BIERIP@TACOM.ARMY.MIL		<b>Code</b> W56HZV		<b>10. This Acquisition Is</b> <input checked="" type="checkbox"/> Unrestricted <input type="checkbox"/> Set Aside: % For  <input type="checkbox"/> Small Business <input type="checkbox"/> Hubzone Small Business <input type="checkbox"/> 8(A) NAICS: 336211 Size Standard:		<b>11. Delivery For FOB Destination Unless Block Is Marked</b> <input checked="" type="checkbox"/> See Schedule  <input checked="" type="checkbox"/> 13a. This Contract Is A Rated Order Under DPAS (18 CFR 700)  <b>13b. Rating</b> DOA4  <b>14. Method Of Solicitation</b> <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP	
<b>15. Deliver To</b> SEE SCHEDULE		<b>Code</b>		<b>16. Administered By</b> DCMA CHICAGO 1523 WEST CENTRAL ROAD BLDG 203 ARLINGTON HEIGHTS IL 60004-2451		<b>Code</b> S1403A	
<b>Telephone No.</b>		<b>17. Contractor/Offeror</b> <b>Code</b> 45152 <b>Facility</b>		<b>18a. Payment Will Be Made By</b> <b>Code</b> HQ0339 DFAS - COLUMBUS CENTER DFAS-CO/WEST ENTITLEMENT OPERATIONS P.O. BOX 182381 COLUMBUS, OH 43218-2381			
<b>Telephone No.</b>		<input type="checkbox"/> 17b. Check If Remittance Is Different And Put Such Address In Offer		<b>18b. Submit Invoices To Address Shown In Block 18a Unless Block Below Is Checked</b> <input type="checkbox"/> See Addendum			
<b>19. Item No.</b>	<b>20. Schedule Of Supplies/Services</b>			<b>21. Quantity</b>	<b>22. Unit</b>	<b>23. Unit Price</b>	<b>24. Amount</b>
	SEE SCHEDULE						
(Use Reverse and/or Attach Additional Sheets As Necessary)							
<b>25. Accounting And Appropriation Data</b> ACRN: AA 2111 4109601034CPCP01041000025EA S40044 S40044						<b>26. Total Award Amount (For Govt. Use Only)</b> \$472,103.88	
<input type="checkbox"/> 27a.Solicitation Incorporates By Reference FAR 52.212-1,52.212-4,FAR 52.212-3 And 52.212-5 Are Attached. Addenda <input type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.							
<input checked="" type="checkbox"/> 27b.Contract/Purchase Order Incorporates By Reference FAR 52.212-4. FAR 52.212-5 Is Attached. Addenda <input checked="" type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.							
<input type="checkbox"/> 28. Contractor Is Required To Sign This Document And Return _____ Copies to Issuing Office. Contractor Agrees To Furnish And Deliver All Items Set Forth Or Otherwise Identified Above And On Any Additional Sheets Subject To The Terms And Conditions Specified Herein.				<input type="checkbox"/> 29. Award Of Contract: Ref. _____ Offer Dated _____. Your Offer On Solicitation (Block 5), Including Any Additions Or Changes Which Are Set Forth Herein, Is Accepted As To Items:			
<b>30a. Signature Of Offeror/Contractor</b>				<b>31a. United States Of America (Signature Of Contracting Officer)</b>			
<b>30b. Name And Title Of Signer (Type Or Print)</b>		<b>30c. Date Signed</b>		<b>31b. Name Of Contracting Officer (Type Or Print)</b> M. J. FRANZEN /SIGNED/ FRANZENM@TACOM.ARMY.MIL (810)574-6304		<b>31c. Date Signed</b>	

19. Item No.	20. Schedule Of Supplies/Services	21. Quantity	22. Unit	23. Unit Price	24. Amount

32a. Quantity In Column 21 Has Been

☐ Received ☐ Inspected ☐ Accepted, And Conforms To The Contract, Except As Noted: \_\_\_\_\_

32b. Signature Of Authorized Government Representative		32c. Date	32d. Printed Name and Title of Authorized Government Representative		
32e. Mailing Address of Authorized Government Representative			32f. Telephone Number of Authorized Government Representative		
			32g. E-Mail of Authorized Government Representative		
33. Ship Number		34. Voucher Number	35. Amount Verified Correct For	36. Payment	37. Check Number
<input type="checkbox"/> Partial	<input type="checkbox"/> Final			<input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final	
38. S/R Account Number	39. S/R Voucher Number	40. Paid By			
41a. I Certify This Account Is Correct And Proper For Payment			42a. Received By (Print)		
41b. Signature And Title Of Certifying Officer			41c. Date	42b. Received At (Location)	
				42c. Date Rec'd (YY/MM/DD)	42d. Total Containers

CONTINUATION SHEET	Reference No. of Document Being Continued PIIN/SIIN W56HZV-04-D-B011/0001 MOD/AMD	Page 2 of 5
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Name of Offeror or Contractor: OSHKOSH TRUCK CORP.

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0111	<p>SUPPLIES OR SERVICES AND PRICES/COSTS</p> <p>NSN: 9999-99-011-0011 FSCM: CPAIQ PART NR: 11AMBULANCEFITTEDWESSENTIA SECURITY CLASS: Unclassified</p>				
0111AA	<p><u>FIRST ORDERING PERIOD</u></p> <p>NOUN: 11AMBULANCEFITTEDWESSENTIAEQ PRON: EH4W0001EH PRON AMD: 04 ACRN: AA AMS CD: 04100000000 CUSTOMER ORDER NO: W915WE41289391</p> <p>NOUN: AMBULANCE VEHICLE FITTED WITH ESSENTIAL EQUIPMENT, IN ACCORDANCE WITH THE CONTRACT SPECIFICATIONS AT C.1, ATTACHED AS ATTACHMENT 001, AND THE INCORPORATED COMPLETED TECHNICAL INFORMATION QUESTIONNAIRE, ATTACHMENT 002.</p> <p>EACH AMBULANCE SHALL BE OVERPACKED WITH THE CONTRACTOR'S AVAILABLE OPERATOR MANUAL (ANY LANGUAGE).</p> <p>CONTRACTOR MUST PROVIDE AN ENGLISH AND ARABIC (DIALECT APPROPRIATE TO IRAQ) MANUAL (IN ACCORDANCE WITH C.2) WHICH IS INCLUSIVE OF THE PROPOSED UNIT PRICE.</p> <p>VEHICLES CAN BE AND WILL BE EXPECTED TO BE SHIPPED WITH THE AVAILABLE VEHICLE'S STANDARD MANUAL, IN WHATEVER LANGUAGE, BUT THE CONTRACTOR WILL BE PAID ONLY 80% OF THE TOTAL COST PER VEHICLE UPON ACCEPTANCE IF THE TWO REQUIRED LANGUAGE MANUALS ARE NOT INCLUDED WITH THE ORIGINAL SHIPMENT.</p> <p>WHEN ENGLISH AND ARABIC TRANSLATED MANUALS ARE PROVIDED, (ONE OR BOTH, WHATEVER COMPLETES THE REQUIREMENT OF BOTH MANUAL TYPES), THE ADDITIONAL 20% OF THE UNIT PRICE, PER VEHICLE, WILL BE PAID UPON ACCEPTANCE OF THE MANUALS.</p> <p>(End of narrative B001)</p> <p><u>Packaging and Marking</u></p> <p>STANDARD COMMERCIAL PRACTICE FOR SAFE DELIVERY TO BASRAH.</p> <p>(End of narrative D001)</p>	6	EA	\$ 78,683.98000	\$ 472,103.88



CONTINUATION SHEET	Reference No. of Document Being Continued PIIN/SIIN W56HZV-04-D-B011/0001 MOD/AMD	Page 4 of 5
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Name of Offeror or Contractor: OSHKOSH TRUCK CORP.

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT						
2001	SECURITY CLASS: Unclassified										
2001AA	<p><u>SUPPLEMENTAL MANUALS IAW CLIN 0111AA</u></p> <p>NOUN: SERVICE/REPAIR/OPERATOR MANUALS FOR THE MINISTRY OF OIL IN ACCORDANCE WITH C.2.</p> <p>MANUALS ARE "NOT SEPARATELY PRICED"</p> <p>(End of narrative B001)</p> <p><u>Inspection and Acceptance</u> INSPECTION: Destination      ACCEPTANCE: Destination</p> <p><u>Deliveries or Performance</u></p> <table><tr><td><u>DEL REL CD</u></td><td><u>QUANTITY</u></td><td><u>DAYS AFTER AWARD</u></td></tr><tr><td>001</td><td>6</td><td>0127</td></tr></table> <p>SHIP TO: Falah Al-Khawaja COMMERCIAL MANAGER MINISTRY OF OIL ECONOMIC AND FINANCE DIRECTORATE BAGHDAD, IRAQ PHONE: 914-360-3528</p> <p>SHIPMENT OF MANUALS BY FEDEX OR DHL PREFERRED</p> <p>(End of narrative F001)</p>	<u>DEL REL CD</u>	<u>QUANTITY</u>	<u>DAYS AFTER AWARD</u>	001	6	0127	6	EA		\$ <u>                    </u> ** NSP **
<u>DEL REL CD</u>	<u>QUANTITY</u>	<u>DAYS AFTER AWARD</u>									
001	6	0127									

Name of Offeror or Contractor: OSHKOSH TRUCK CORP.

CONTRACT ADMINISTRATION DATA

PRON/					JOB		
LINE	AMS	CD/	OBLG		ORDER	ACCOUNTING	OBLIGATED
<u>ITEM</u>	<u>MIPR</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>	<u>NUMBER</u>	<u>STATION</u>	<u>AMOUNT</u>
0111AA	EH4W0001EH	AA	1	2111 4109601034CPCP01041000025EA S40044		S40044 \$	472,103.88
	04100000000						
	W915WE41289391						
						TOTAL	\$ 472,103.88
SERVICE					ACCOUNTING		
<u>NAME</u>	<u>TOTAL BY ACRN</u>		<u>ACCOUNTING CLASSIFICATION</u>		<u>STATION</u>		<u>AMOUNT</u>
Army	AA		2111 4109601034CPCP01041000025EA S40044		S40044	\$	472,103.88
						TOTAL	\$ 472,103.88